# **Boulder County Needs Assessment:**

Systems, Services & Supports for People with Intellectual & Developmental Disabilities

## **Background**

Boulder County Department of Housing and Human Services (BCDHHS), with the support of the Boulder County Commissioners, hired OMNI Institute (OMNI) and Keystone Policy Center (Keystone) to conduct a county-wide assessment to explore the needs of individuals with intellectual and developmental disabilities (IDD). Boulder County voters approved the developmental disabilities property tax in 2002 to fund programs for individuals with developmental disabilities and their families. BCDHHS is committed to ensuring that county Mill Levy funds are utilized efficiently and effectively, with up-to-date information about the needs of the IDD community. The needs assessment sought a wide range of feedback from individuals with IDD, families, direct service providers, and community partners to understand the positive impacts of Mill Levy funds as well as gaps in the services continuum that could be addressed through future investments. For the purpose of this report, intellectual and developmental disabilities are defined as:

- A developmental disability that is manifested before the person reaches 22 years of age or brain injury acquired as an adult.
- A disability attributed to a diagnosed intellectual disability or related conditions which include cerebral palsy, epilepsy, autism or other neurological conditions when such conditions result in EITHER impairment of general intellectual functioning OR adaptive behavior similar to that of a person with a diagnosed intellectual disability.

# **Needs Assessment Methods & Participants**

The figure below provides a snapshot of primary needs assessment methods. This report brief will highlight the 3 top areas listed below related to stakeholder feedback. Information on the literature review and Medicaid data analysis can be found in the full report.



#### **COMMUNITY SURVEY**

313 stakeholders shared opinions about access to IDD info & services, and needs & priorities for services and supports.



#### **COMMUNITY FORUMS**

61 participants attended community forums to discuss IDD services and supports.



#### **FOCUS GROUPS & INTERVIEWS**

21 participants with IDD, 5 family members, and 38 professionals were interviewed in groups and/or by phone.



#### LITERATURE REVIEW

Reviewed best and emerging practices and trends, program cost information, evaluation tools, and relevant policies and rules pertaining to IDD supports and services.



Explored trends in Medicaid utilization for Boulder County.







# **Community Voices in Boulder County**



There should be nothing about us without us. People need to be at the table. Promoting, supporting and empowering citizen experts and self-advocates.

-Self-Advocate



### **Ongoing Community Input**

All stakeholder groups stressed the need for ongoing community input to inform decisions related to IDD funding and service provision. Stakeholders expressed great enthusiasm to take part in the assessment and ensure that community voices were heard.

### **Tangible Impacts from Funds**

Stakeholders repeatedly emphasized the importance of ensuring programs and services supported by mill levy funds are tangible and that program impacts are monitored. Some stakeholders had concerns that funds can appear to be subsumed by existing systems.

### **Positive Experiences & Perceived Strengths**

Stakeholders often took the time to share their positive experiences or perceived strengths of the system, despite the focus of dialogue on community needs. The following top themes emerged related to community strengths.



The power of positive support, engagement with peers and mentorship, along with co-advocacy and information-sharing was strongly emphasized by stakeholders.



Self-advocacy trainings have equipped many individuals with IDD to use their voices and protect themselves when safety concerns arise, as well as fostered greater independence and engagement in the community.



Positive experiences with service providers in Boulder County were also emphasized as some stakeholders noted specific individuals working within organizations who had shown care, respect, investment, and expertise.







# **Priority Needs Identified by Stakeholders**

Issues related to the overall functioning of IDD service systems as well as how people with IDD access needed services were ongoing themes in both the survey and stakeholder dialogue.

- Stakeholder dialogue emphasized that a lack of clear information about available services, along with difficult processes for determining eligibility for different services, often prevented timely access.
- Survey respondents were asked to rate a series of items regarding perceived accessibility of services (e.g., ease of access, clarity of requirements, timeliness, etc.). The process to get needed services (e.g., paperwork and documentation) was the lowest rated survey item in this area by family members, community members and providers.

# Priority Needs Identified By Stakeholders



#### Housing

Stakeholders raised concerns about a lack of access to clear information regarding options and choices for safe, accessible and affordable housing. Quality of care in home setting was also mentioned frequently.

# Systems Navigation, Case Management, and Advocacy

Supplementing case management services with systems navigation and advocacy services was repeatedly mentioned by stakeholders. Provider workforce issues such as high staff turnover, provider training gaps, and transition of care were also mentioned.

#### **Mental Health**

Access to qualified providers was the most common theme that surfaced related to mental health.

# Self-Advocacy, Engagement, and Social Connectedness

Stakeholders voiced needs for increased opportunities for people with IDD to be engaged and represented in the community. They also shared interest in self-advocacy trainings and leadership skill building events.

### **Community Education and IDD Awareness**

Stakeholders surfaced a lack of community awareness about the IDD community by key groups such as first responders, legal services, victim centers, recreation centers and local businesses.

### **Ongoing Monitoring and Evaluation**

The need to collect ongoing data and monitor changes in policy was repeatedly mentioned by stakeholders. They also voiced a desire for increased accountability measures including transparency about funding and program expenditures.







## **Recommendations**

All recommendations were developed with careful consideration of stakeholder feedback, along with the larger policy context related to IDD service funding and provision. They are intended to provide a broad range of options. Some build upon existing programs or infrastructure while others would require innovations or pilot efforts. Recommendation areas align with each core priority identified by stakeholders. Although all recommendations cannot feasibly be implemented immediately, BCDHSS developed estimated timelines and phases for the work that can be found in the full report.

### **Housing**



#### Affordable Accessible Housing

Increase local affordable and accessible housing options for individuals with IDD specifically



#### Safety Mechanisms

Enhance safety mechanisms in the current host home model in Boulder County. Guidelines and requirements for host homes exist but regulation and inspections are currently inadequate

**Case Management** 

Build Boulder County case

multiple service providers

management capacity through

expanded options and choices

for case management through



#### **Innovations**

Fund innovative pilot approaches to housing; allow family support grants to support establishing shared family housing

### **Systems Navigation, Case Management,** and Advocacy



# **Capacity Study**

Undertake a provider capacity and availability study for case management agencies and direct-service provider supply in the County

#### **Navigation & Advocacy**

Direct funding to systems navigation and/or advocacy efforts



#### Family Advocates

Fund programs to recruit and train paid family advocates who have acquired critical lived experience and systems navigation expertise

#### Information

Expand upon existing resources and tools to create a comprehensive, centralized online repository for IDDrelated information





### **Mental Health**

#### **Training**

Expand training and development of the mental health workforce to increase the availability of providers qualified to serve individuals with IDD

#### **Wraparound Services**

Expand Boulder HHS High Fidelity Wraparound services to people with IDD to help navigate mental health services



# **Self-Advocacy, Community Engagement, and Social Connectedness**



#### **Self-Advocacy Training**

Increase funding for self-advocacy training



#### Social and Recreational

Increase funding for social and recreational programming to enhance social connectedness



## Ongoing Consultation from People with IDD

Create a formal process for seeking and promoting consultation from leaders and self-advocates with IDD



#### **Community Engagement**

Promote opportunities for people with IDD and their families to engage with community in forums/environments that are often harder to access (e.g., theater and arts, etc.)









# Community Education and IDD Awareness

#### **Training**

Invest in training and specific referral processes for key systems and community organizations including emergency response and crisis systems, local homeless shelters, mental health providers, law enforcement, etc.

Develop a general disability awareness training that can be tailored for local businesses and other community spaces

### **Ongoing Monitoring and Evaluation**











#### **Ongoing Data Collection**

Invest in ongoing data collection about disability and service needs at the community level

#### **Define Mill Levy Expenses**

Better define eligible and allowable activities and expenses under the Mill Levy

**OMNI** 

Develop a community advisory council for fiscal decision-making and monitoring of funded efforts including individuals with disabilities and their families to increase transparency

### **Monitor Policy Changes**

Ensure ongoing monitoring of state and national policy initiatives and changes



Increase evaluation reporting requirements for all funded programs to include systems wide metrics and outcomes



